



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 5113

SERIAL NUMBER 09/773,148	FILING DATE 01/31/2001 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO. COR185-09
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APPLICANTS

Babak Rezvani, Ossling, NY;
Jack L. Chen, Astoria, NY;

** CONTINUING DATA *****

THIS APPLN CLAIMS BENEFIT OF 60/230,315 09/06/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 05/30/2001

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Kenneth R. De Rosa
Wolf, Block, Schorr & Solis-Cohen LLP
22 Floor
1650 Arch Street
Philadelphia, PA 19103-2097

TITLE

Method and system for adaptively setting a data refresh interval

FILING FEE RECEIVED 481	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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BIBDATASHEET

CONFIRMATION NO. 5113

Bib Data Sheet

SERIAL NUMBER 09/773,148	FILING DATE 01/31/2001 RULE	CLASS 709	GROUP ART UNIT 2151	ATTORNEY DOCKET NO. COR185-09
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APPLICANTS

Babak Rezvani, New York, NY;

Jack L. Chen, Astoria, NY;

** CONTINUING DATA ***** RK

This appln claims benefit of 60/230,315 09/06/2000

** FOREIGN APPLICATIONS ***** RK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 05/30/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<table><tr><td><input type="checkbox"/> yes</td><td><input checked="" type="checkbox"/> no</td></tr><tr><td><input type="checkbox"/> yes</td><td><input checked="" type="checkbox"/> no</td></tr></table> Examiner's Signature <u>R Kennedy</u> Initials <u>RK</u>	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 2
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